

FORM B1						United States Bankruptcy Court Western District of Virginia							Voluntary Petition							
Name of Debtor (if individual, enter Last, First, Middle): <b>Davis, LaShawn Hubbard</b>								Name of Joint Debtor (Spouse)(Last, First, Middle):												
All Other Names used by the Debtor in the last 6 years (include married, maiden, and trade names): <b>LaShawn Marie Hubbard</b>								All Other Names used by the Joint Debtor in the last 6 years (include married, maiden, and trade names):												
Last four digits of Soc. Sec. No. / Complete EIN or other Tax I.D. No. (if more than one, state all): <b>4479</b>								Last four digits of Soc. Sec. No. / Complete EIN or other Tax I.D. No. (if more than one, state all):												
Street Address of Debtor (No. & Street, City, State & Zip Code): <b>PO Box 633 Concord VA 24538</b>								Street Address of Joint Debtor (No. & Street, City, State & Zip Code):												
County of Residence or of the Principal Place of Business: <b>Appomattox</b>								County of Residence or of the Principal Place of Business:												
Mailing Address of Debtor (if different from street address):								Mailing Address of Joint Debtor (if different from street address):												
Location of Principal Assets of Business Debtor (if different from street address above):																				
<b>Information Regarding the Debtor (Check the Applicable Boxes)</b>																				
<b>Venue (Check any applicable box)</b> <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.																				
<b>Type of Debtor</b> (Check all boxes that apply) <input checked="" type="checkbox"/> Individual(s) <input type="checkbox"/> Railroad <input type="checkbox"/> Corporation <input type="checkbox"/> Stockbroker <input type="checkbox"/> Partnership <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Other _____ <input type="checkbox"/> Clearing Bank								<b>Chapter or Section of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input checked="" type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Sec. 304 - Case ancillary to foreign proceeding												
<b>Nature of Debts</b> (Check one box) <input checked="" type="checkbox"/> Consumer/Non-Business <input type="checkbox"/> Business								<b>Filing Fee</b> (Check one box) <input checked="" type="checkbox"/> Full Filing Fee Attached <input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only) Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form No. 3.												
<b>Chapter 11 Small Business (Check all boxes that apply)</b> <input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101 <input type="checkbox"/> Debtor is and elects to be considered a small business under 11 U.S.C. § 1121(e) (Optional)																				
<b>Statistical/Administrative Information</b> (Estimates only) <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.											THIS SPACE IS FOR COURT USE ONLY									
Estimated Number of Creditors							1-15 <input type="checkbox"/>	16-49 <input checked="" type="checkbox"/>	50-99 <input type="checkbox"/>	100-199 <input type="checkbox"/>							200-999 <input type="checkbox"/>	1000-over <input type="checkbox"/>		
Estimated Assets							\$0 to \$50,000 <input checked="" type="checkbox"/>	\$50,001 to \$100,000 <input type="checkbox"/>	\$100,001 to \$500,000 <input type="checkbox"/>	\$500,001 to \$1 million <input type="checkbox"/>							\$1,000,001 to \$10 million <input type="checkbox"/>	\$10,000,001 to \$50 million <input type="checkbox"/>	\$50,000,001 to \$100 million <input type="checkbox"/>	More than \$100 million <input type="checkbox"/>
Estimated Debts							\$0 to \$50,000 <input checked="" type="checkbox"/>	\$50,001 to \$100,000 <input type="checkbox"/>	\$100,001 to \$500,000 <input type="checkbox"/>	\$500,001 to \$1 million <input type="checkbox"/>							\$1,000,001 to \$10 million <input type="checkbox"/>	\$10,000,001 to \$50 million <input type="checkbox"/>	\$50,000,001 to \$100 million <input type="checkbox"/>	More than \$100 million <input type="checkbox"/>

(Official Form 1) (12/03)

FORM B1, Page 2

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): <b>LaShawn Hubbard Davis</b>	
<b>Prior Bankruptcy Case Filed Within Last 6 Years (If more than one, attach additional sheet)</b>			
Location Where Filed: <b>Lynchburg</b>		Case Number: <b>99-01075-WA1-7</b>	
Date Filed: <b>02/19/2003</b>			
<b>Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)</b>			
Name of Debtor: <b>NONE</b>		Case Number:	
Date Filed:			
District:		Relationship:	
Judge:			
<b>Signatures</b>			
<b>Signature(s) of Debtor(s) (Individual/Joint)</b>  I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  <b>X /s/ LaShawn Hubbard Davis</b> Signature of Debtor  <b>X Not Applicable</b> Signature of Joint Debtor  Telephone Number (If not represented by attorney)  <b>7/25/2005</b> Date		<b>Exhibit A</b> (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11) <input type="checkbox"/> Exhibit A is attached and made a part of this petition.	
<b>Signature of Attorney</b> <b>X /s/ R. Mitchell Garbee</b> Signature of Attorney for Debtor(s)  <b>R MITCHELL GARBEE, 15073</b> Printed Name of Attorney for Debtor(s) / Bar No.  <b>WILSON GARBEE &amp; ROSENBERGER</b> Firm Name <b>PO BOX 778 LYNCHBURG VA 24505</b> Address  <b>434-847-9066</b> <b>434-847-9069</b> Telephone Number <b>7/25/2005</b> Date		<b>Exhibit B</b> (To be completed if debtor is an individual whose debts are primarily consumer debts) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. <b>X /s/ R. Mitchell Garbee</b> <b>7/25/2005</b> Signature of Attorney for Debtor(s) Date	
		<b>Exhibit C</b> Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No	
<b>Signature of Debtor (Corporation/Partnership)</b>  I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition. <b>X Not Applicable</b> Signature of Authorized Individual  Printed Name of Authorized Individual  Title of Authorized Individual  Date		<b>Signature of Non-Attorney Petition Preparer</b>  I certify that I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document.  <b>Not Applicable</b> Printed Name of Bankruptcy Petition Preparer  Social Security Number (Required by 11 U.S.C. § 110(c).)  Address  Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document:  If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.  <b>X Not Applicable</b> Signature of Bankruptcy Petition Preparer  Date  A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.	

Form 7  
(12/03)UNITED STATES BANKRUPTCY COURT  
Western District of VirginiaIn re: **LaShawn Hubbard Davis**  
**4479**Case No. \_\_\_\_\_  
Chapter **13****STATEMENT OF FINANCIAL AFFAIRS****1. Income from employment or operation of business**

None



State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE	FISCAL YEAR PERIOD
<b>17,000.00</b>	<b>CVTC</b>	<b>2003</b>
<b>18,000.00</b>	<b>Thomasville Furniture</b>	<b>2004</b>
<b>11,253.69</b>	<b>Thomasville Furniture</b>	<b>2005</b>

**2. Income other than from employment or operation of business**

None



State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE	FISCAL YEAR PERIOD
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**3. Payments to creditors**

None



a. List all payments on loans, installment purchases of goods or services, and other debts, aggregating more than \$600 to any creditor, made within **90 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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b. List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None



NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None



a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
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b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None



NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
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#### 5. Repossessions, foreclosures and returns

None



List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
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#### 6. Assignments and receiverships

None



a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
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b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None  
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NAME AND ADDRESS OF CUSTODIAN	NAME AND ADDRESS OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
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## 7. Gifts

None  
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List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
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## 8. Losses

None  
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List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
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## 9. Payments related to debt counseling or bankruptcy

None  
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List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
<b>R Mitchell Garbee</b>	<b>7/20/05</b>	<b>\$194.00 for USBC filing fee</b>
<b>PO Box 778</b>	<b>7/22/05</b>	
<b>Lynchburg VA 24505</b>		

## 10. Other transfers

None  
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a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
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### 11. Closed financial accounts

None



List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
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### 12. Safe deposit boxes

None



List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
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### 13. Setoffs

None



List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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### 14. Property held for another person

None



List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
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### 15. Prior address of debtor

None



If the debtor has moved within the **two years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
<b>Pamplin VA</b>	<b>LaShawn Hubbard Davis</b>	<b>11/04-2/05</b>
<b>Appomattox VA</b>	<b>LaShawn Hubbard Davis</b>	<b>10/03-10/04</b>

## 16. Spouses and Former Spouses

None



If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the **six-year period** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

## 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None



SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None



SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

None



NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
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**18. Nature, location and name of business**

None



a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was a self-employed professional within the **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the business, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the business, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

NAME	TAXPAYER I.D. NUMBER	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
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b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None



NAME	ADDRESS
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*[if completed by an individual or individual and spouse]*

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date 7/25/2005

Signature of Debtor /s/ LaShawn Hubbard Davis  
LaShawn Hubbard Davis

FORM B6A  
(6/90)

In re: LaShawn Hubbard Davis, Case No. \_\_\_\_\_  
Debtor (If known)

## SCHEDULE A - REAL PROPERTY

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
Total			0.00	

(Report also on Summary of Schedules.)

FORM B6B  
(10/89)In re **LaShawn Hubbard Davis**

Debtor

Case No.

(If known)

**SCHEDULE B - PERSONAL PROPERTY**

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand	<b>X</b>			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		<b>Checking</b>		<b>50.00</b>
3. Security deposits with public utilities, telephone companies, landlords, and others.		<b>Security Deposit</b>		<b>300.00</b>
4. Household goods and furnishings, including audio, video, and computer equipment.		<b>Bedroom suite \$250; Living room suite \$100; Dining room suite \$30; TV \$40</b>		<b>420.00</b>
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	<b>X</b>			
6. Wearing apparel.	<b>X</b>			
7. Furs and jewelry.		<b>Wearing Apparel</b>		<b>150.00</b>
8. Firearms and sports, photographic, and other hobby equipment.	<b>X</b>			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	<b>X</b>			
10. Annuities. Itemize and name each issuer.	<b>X</b>			
11. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Itemize.	<b>X</b>			
12. Stock and interests in incorporated and unincorporated businesses. Itemize.	<b>X</b>			
13. Interests in partnerships or joint ventures. Itemize.	<b>X</b>			
14. Government and corporate bonds and other negotiable and nonnegotiable instruments.	<b>X</b>			

FORM B6B  
(10/89)In re **LaShawn Hubbard Davis**

Debtor

Case No.

(If known)

**SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
15. Accounts receivable.	<b>X</b>			
16. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	<b>X</b>			
17. Other liquidated debts owing debtor including tax refunds. Give particulars.	<b>X</b>			
18. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	<b>X</b>			
19. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	<b>X</b>			
20. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	<b>X</b>			
21. Patents, copyrights, and other intellectual property. Give particulars.	<b>X</b>			
22. Licenses, franchises, and other general intangibles. Give particulars.	<b>X</b>			
23. Automobiles, trucks, trailers, and other vehicles and accessories.		<b>2004 Hyundai Accent</b>		<b>9,000.00</b>
24. Boats, motors, and accessories.	<b>X</b>			
25. Aircraft and accessories.	<b>X</b>			
26. Office equipment, furnishings, and supplies.	<b>X</b>			
27. Machinery, fixtures, equipment and supplies used in business.	<b>X</b>			
28. Inventory.	<b>X</b>			
29. Animals.	<b>X</b>			

FORM B6B  
(10/89)

In re LaShawn Hubbard Davis, Case No. \_\_\_\_\_  
Debtor (If known)

## SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
30. Crops - growing or harvested. Give particulars.	<b>X</b>			
31. Farming equipment and implements.	<b>X</b>			
32. Farm supplies, chemicals, and feed.	<b>X</b>			
33. Other personal property of any kind not already listed. Itemize.	<b>X</b>			
<u>2</u> continuation sheets attached Total >				<b>\$ 9,920.00</b>

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

FORM B6C  
(6/90)

In re LaShawn Hubbard Davis, Case No. \_\_\_\_\_  
Debtor. (If known)

## SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemption to which debtor is entitled under:

(Check one box)

- ☐ 11 U.S.C. § 522(b)(1) Exemptions provided in 11 U.S.C. § 522(d). **Note: These exemptions are available only in certain states.**
- ☒ 11 U.S.C. § 522(b)(2) Exemptions available under applicable nonbankruptcy federal laws, state or local law where the debtor's domicile has been located for the 180 days immediately preceding the filing of the petition, or for a longer portion of the 180-day period than in any other place, and the debtor's interest as a tenant by the entirety or joint tenant to the extent the interest is exempt from process under applicable nonbankruptcy law.

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT MARKET VALUE OF PROPERTY, WITHOUT DEDUCTING EXEMPTIONS
2004 Hyundai Accent	CV § 34-26(8)	1.00	9,000.00
Bedroom suite \$250; Living room suite \$100; Dining room suite \$30; TV \$40	CV § 34-26(4a)	420.00	420.00
Checking	CV § 34-4	50.00	50.00
Security Deposit	CV § 34-4	300.00	300.00
Wearing Apparel	CV § 34-26(4)	150.00	150.00

FORM B6D  
(12/03)

In re: LaShawn Hubbard Davis, Case No. \_\_\_\_\_  
Debtor (If known)

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions, above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND MARKET VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. <b>425271756</b> <b>AmeriCredit</b> <b>PO Box 78143</b> <b>Phoenix AZ 85062-8143</b>		<b>Security Agreement</b> <b>2004 Hyundai Accent</b>  <b>VALUE \$9,000.00</b>				<b>9,229.00</b>	<b>229.00</b>

0 Continuation sheets attached

**Subtotal** >  
(Total of this page)  
**Total** >  
(Use only on last page)

<b>\$9,229.00</b>
<b>\$9,229.00</b>

(Report total also on Summary of Schedules)

Form B6E  
(04/04)

In re LaShawn Hubbard Davis, Case No. \_\_\_\_\_  
Debtor (If known)

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(2).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$4,925\* per person earned within 90 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(3).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$4,925\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(5).

☐ **Deposits by individuals**

Claims of individuals up to \$2,225\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(6).

☐ **Alimony, Maintenance, or Support**

Claims of a spouse, former spouse, or child of the debtor for alimony, maintenance, or support, to the extent provided in 11 U.S.C. § 507(a)(7).

☐ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Other Priority Debts**

\* Amounts are subject to adjustment on April 1, 2007, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Form B6E - Cont.  
(04/04)

In re LaShawn Hubbard Davis, Case No. \_\_\_\_\_  
Debtor (If known)

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY
ACCOUNT NO.							

Sheet no. 1 of 1 sheets attached to Schedule of Creditors Holding Priority Claims

Subtotal (Total of this page)	>	<b>\$0.00</b>
Total (Use only on last page of the completed Schedule E.)	>	<b>\$0.00</b>

(Report total also on Summary of Schedules)

Form B6F (12/03)

In re **LaShawn Hubbard Davis**

Debtor

Case No. \_\_\_\_\_

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**
☐ Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions, above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>231984479</b> <b>ACS Education Services</b> <b>PO Box 7051</b> <b>Utica NY 13504-7051</b>		<b>Student Loan</b>				<b>7,482.12</b>
ACCOUNT NO. <b>8493</b> <b>Brady &amp; Crist</b> <b>8116 Timberlake Road</b> <b>Lynchburg VA 24502</b>		<b>Dental bill</b>				<b>230.63</b>
ACCOUNT NO. <b>3817599001</b> <b>Centra Health</b> <b>PO Box 2496</b> <b>Lynchburg VA 24501</b>		<b>Medical bill</b>				<b>50.01</b>
ACCOUNT NO. <b>58982 &amp; 259323</b> <b>Central VA Family Physicians</b> <b>PO Box 791266</b> <b>Baltimore MD 21279-1266</b>		<b>Medical bills</b>				<b>773.80</b>
ACCOUNT NO. <b>040070390</b> <b>Creditors Service Agency</b> <b>PO Box 1659</b> <b>Lynchburg VA 24505</b>		<b>Medical bills</b>				<b>450.29</b>

3 Continuation sheets attached

Subtotal &gt;

Total &gt;

**\$8,986.85**

Form B6F - Cont.  
(12/03)In re **LaShawn Hubbard Davis**

Debtor

Case No. \_\_\_\_\_

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions, above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>231984479</b> <b>Direct Loans/US Dept of Education</b> <b>PO Box 530260</b> <b>Atlanta GA 30353-0260</b>		<b>Student Loan</b>				<b>132.38</b>
ACCOUNT NO. <b>515732</b> <b>Lynchburg Anesthesia Assoc</b> <b>PO Box 2689</b> <b>Lynchburg VA 24501</b>		<b>Medical bill</b>				<b>86.10</b>
ACCOUNT NO. <b>490511 &amp; 470434</b> <b>Lynchburg Emergency Physicians</b> <b>PO Box 2080</b> <b>Kilmarnock VA 22482</b>		<b>Medical bill</b>				<b>390.00</b>
ACCOUNT NO. <b>LEP488895-289376</b> <b>Lynchburg Emergency Physicians</b> <b>c/o Commonwealth Collections</b> <b>PO Box 2080</b> <b>Kilmarnock VA 22482</b>		<b>Medical bills</b>				<b>140.00</b>
ACCOUNT NO. <b>00081791049174</b> <b>NCO</b> <b>PO Box 41466</b> <b>Philadelphia PA 19101</b>		<b>Collection Agency</b>				<b>258.44</b>

Sheet no. 1 of 3 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal  
(Total of this page) >

Total &gt;

(Use only on last page of the completed Schedule F.)

**\$1,006.92**

Form B6F - Cont.  
(12/03)In re **LaShawn Hubbard Davis**

Debtor

Case No. \_\_\_\_\_

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions, above.)	CODEBATOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.						
<b>Nesbe Cable</b> <b>PO Box 768</b> <b>Rustburg VA 24588</b>		<b>Cable tv</b>				<b>345.47</b>
ACCOUNT NO. <b>51418</b>						
<b>Neurology Associates</b> <b>1933 Thomson Drive</b> <b>Lynchburg VA 24501</b>		<b>Medical bills</b>				<b>157.25</b>
ACCOUNT NO. <b>2921263</b>						
<b>SCA Credit Services</b> <b>PO Box 13945</b> <b>Roanoke VA 24038</b>		<b>Medical bill</b>				<b>50.01</b>
ACCOUNT NO. <b>2546540</b>						
<b>SCA Credit Services</b> <b>PO Box 13945</b> <b>Roanoke VA 24038</b>		<b>Medical bills</b>				<b>574.14</b>
ACCOUNT NO. <b>00602587</b>						
<b>Southside Electric Coop</b> <b>c/o Online Collections</b> <b>202 W Firetower Road</b> <b>Winterville NC 285909-8412</b>		<b>Utility</b>				<b>125.93</b>

Sheet no. 2 of 3 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal  
(Total of this page) >

Total &gt;

(Use only on last page of the completed Schedule F.)

**\$1,252.80**

Form B6F - Cont.  
(12/03)

In re **LaShawn Hubbard Davis** Case No. \_\_\_\_\_  
Debtor (If known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions, above.)	CODEBATOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>666389</b>  <b>Surgery Center of Lynchburg</b> <b>2401 Atherholt Road</b> <b>Lynchburg VA 24501</b>		<b>Medical bill</b>				<b>278.04</b>
ACCOUNT NO. <b>4349933319</b>  <b>The News &amp; Advance</b> <b>PO Box 10129</b> <b>Lynchburg VA 24506</b>		<b>Newspaper</b>				<b>88.25</b>
ACCOUNT NO. <b>205206</b>  <b>Womens Health Services</b> <b>114 Nationwide Drive</b> <b>Lynchburg VA 24502</b>		<b>Medical bill</b>				<b>2,280.80</b>

Sheet no. 3 of 3 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal  
(Total of this page) >

Total >

(Use only on last page of the completed Schedule F.)

<b>\$2,647.09</b>
<b>\$13,893.66</b>

(Report also on Summary of Schedules)

Form B6G

(10/89)

In re: LaShawn Hubbard Davis, Case No. \_\_\_\_\_  
Debtor (If known)

## SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

☒ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST, STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

B6H  
(6/90)

In re: **LaShawn Hubbard Davis** , Case No. \_\_\_\_\_  
Debtor (If known)

## SCHEDULE H - CODEBTORS

☒ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
------------------------------	------------------------------

Form B61  
(12/03)In re **LaShawn Hubbard Davis**

Case No. \_\_\_\_\_

Debtor

(If known)

**SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**

Debtor's Marital Status: <b>separated</b>	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP <b>son</b>	AGE <b>2</b>
<b>Employment:</b>	DEBTOR	SPOUSE
Occupation	<b>Fork Lift Driver</b>	
Name of Employer	<b>Thomasville Furniture</b>	
How long employed	<b>1 1/2 years</b>	
Address of Employer	<b>ATTN: Payroll PO Box 339 Thomasville NC 28360</b>	

**Income:** (Estimate of average monthly income)Current monthly gross wages, salary, and commissions  
(pro rate if not paid monthly.)

DEBTOR	SPOUSE
\$ <u>1,896.87</u>	\$ _____
\$ <u>0.00</u>	\$ _____

Estimated monthly overtime

\$ _____	\$ _____
----------	----------

SUBTOTAL

\$ <u>1,896.87</u>	\$ _____
--------------------	----------

LESS PAYROLL DEDUCTIONS

a. Payroll taxes and social security

\$ <u>355.46</u>	\$ _____
------------------	----------

b. Insurance

\$ <u>208.13</u>	\$ _____
------------------	----------

c. Union dues

\$ <u>0.00</u>	\$ _____
----------------	----------

d. Other (Specify) **United Way**

\$ <u>8.67</u>	\$ _____
----------------	----------

SUBTOTAL OF PAYROLL DEDUCTIONS

\$ <u>572.26</u>	\$ _____
------------------	----------

TOTAL NET MONTHLY TAKE HOME PAY

\$ <u>1,324.61</u>	\$ _____
--------------------	----------

Regular income from operation of business or profession or farm  
(attach detailed statement)

\$ <u>0.00</u>	\$ _____
----------------	----------

Income from real property

\$ <u>0.00</u>	\$ _____
----------------	----------

Interest and dividends

\$ <u>0.00</u>	\$ _____
----------------	----------

Alimony, maintenance or support payments payable to the debtor for the  
debtor's use or that of dependents listed above.

\$ <u>216.00</u>	\$ _____
------------------	----------

Social security or other government assistance  
(Specify) \_\_\_\_\_

\$ <u>0.00</u>	\$ _____
----------------	----------

Pension or retirement income

\$ <u>0.00</u>	\$ _____
----------------	----------

Other monthly income

(Specify) _____	\$ <u>0.00</u>	\$ _____
-----------------	----------------	----------

TOTAL MONTHLY INCOME

\$ <u>1,540.61</u>	\$ _____
--------------------	----------

TOTAL COMBINED MONTHLY INCOME \$ 1,540.61 (Report also on Summary of Schedules)

Describe any increase or decrease of more than 10% in any of the above categories anticipated to occur within the year following the filing of this document:

**NONE**

Form B6J  
(6/90)In re **LaShawn Hubbard Davis**

Case No. \_\_\_\_\_

Debtor

(If known)

**SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)**

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse".

Rent or home mortgage payment (include lot rented for mobile home)	\$	<u>300.00</u>
Are real estate taxes included? Yes _____ No <u>✓</u>		
Is property insurance included? Yes _____ No <u>✓</u>		
Utilities Electricity and heating fuel	\$	<u>120.00</u>
Water and sewer	\$	<u>0.00</u>
Telephone	\$	<u>45.00</u>
Other _____	\$	<u>0.00</u>
Home maintenance (repairs and upkeep)	\$	<u>0.00</u>
Food	\$	<u>175.00</u>
Clothing	\$	<u>30.00</u>
Laundry and dry cleaning	\$	<u>20.00</u>
Medical and dental expenses	\$	<u>40.00</u>
Transportation (not including car payments)	\$	<u>120.00</u>
Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	<u>0.00</u>
Charitable contributions	\$	<u>0.00</u>
Insurance (not deducted from wages or included in home mortgage payments)		
Homeowner's or renter's	\$	<u>0.00</u>
Life	\$	<u>0.00</u>
Health	\$	<u>0.00</u>
Auto	\$	<u>142.00</u>
Other <b>Cancer Insurance</b>	\$	<u>16.00</u>
Taxes (not deducted from wages or included in home mortgage payments)		
(Specify) <b>PP</b>	\$	<u>15.00</u>
Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan)		
Auto	\$	<u>0.00</u>
Other _____	\$	<u>0.00</u>
Alimony, maintenance or support paid to others	\$	<u>0.00</u>
Payments for support of additional dependents not living at your home	\$	<u>0.00</u>
Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	<u>0.00</u>
Other <b>Baby Supplies</b>	\$	<u>58.00</u>
<b>Child Care</b>	\$	<u>216.00</u>

TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)

\$ 1,297.00

[FOR CHAPTER 12 AND 13 DEBTORS ONLY]

Provide the information requested below, including whether plan payments are to be made bi-weekly, monthly, annually, or at some other regular interval.

A. Total projected monthly income	\$	<u>1,540.61</u>
B. Total projected monthly expenses	\$	<u>1,297.00</u>
C. Excess income (A minus B)	\$	<u>243.61</u>
D. Total amount to be paid into plan each _____	\$	<u>242.66</u>
	<b>Monthly</b> (interval)	

Form B6  
(6/90)

# United States Bankruptcy Court Western District of Virginia

In re **LaShawn Hubbard Davis**

Case No.

Chapter **13**

## SUMMARY OF SCHEDULES

### AMOUNTS SCHEDULED

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	<b>YES</b>	<b>1</b>	\$ <b>0.00</b>		
B - Personal Property	<b>YES</b>	<b>3</b>	\$ <b>9,920.00</b>		
C - Property Claimed as Exempt	<b>YES</b>	<b>1</b>			
D - Creditors Holding Secured Claims	<b>YES</b>	<b>1</b>		\$ <b>9,229.00</b>	
E - Creditors Holding Unsecured Priority Claims	<b>YES</b>	<b>2</b>		\$ <b>0.00</b>	
F - Creditors Holding Unsecured Nonpriority Claims	<b>YES</b>	<b>4</b>		\$ <b>13,893.66</b>	
G - Executory Contracts and Unexpired Leases	<b>YES</b>	<b>1</b>			
H - Codebtors	<b>YES</b>	<b>1</b>			
I - Current Income of Individual Debtor(s)	<b>YES</b>	<b>1</b>			\$ <b>1,540.61</b>
J - Current Expenditures of Individual Debtor(s)	<b>YES</b>	<b>1</b>			\$ <b>1,297.00</b>
Total Number of sheets in ALL Schedules ➤		<b>16</b>			
Total Assets ➤			\$ <b>9,920.00</b>		
Total Liabilities ➤				\$ <b>23,122.66</b>	

Official Form 6 - Cont .  
(12/03)

In re: **LaShawn Hubbard Davis**  
Debtor

Case No. \_\_\_\_\_  
(If known)

## DECLARATION CONCERNING DEBTOR'S SCHEDULES

### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 17  
(Total shown on summary page plus 1.)  
sheets plus the summary page, and that they are true and correct to the best of my knowledge, information, and belief.

Date: **7/25/2005**

Signature: **/s/ LaShawn Hubbard Davis**  
**LaShawn Hubbard Davis**

[If joint case, both spouses must sign]

### DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

(NOT APPLICABLE)

UNITED STATES BANKRUPTCY COURT  
Western District of Virginia

In re: **LaShawn Hubbard Davis**

Case No. \_\_\_\_\_

Chapter **13**

Debtor

**DISCLOSURE OF COMPENSATION OF ATTORNEY  
FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	<u>1,600.00</u>
Prior to the filing of this statement I have received	\$	<u>0.00</u>
Balance Due	\$	<u>1,600.00</u>

2. The source of compensation paid to me was:

☐ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☐ Debtor ☒ Other (specify) **Debtor's Chapter 13 Plan**

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a) Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b) Preparation and filing of any petition, schedules, statement of affairs, and plan which may be required;
- c) Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d) [Other provisions as needed]

**None**

6. By agreement with the debtor(s) the above disclosed fee does not include the following services:

**Does not include services rendered after confirmation or services not contemplated prior to confirmation**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: 7/25/2005

/s/ R. Mitchell Garbee  
R MITCHELL GARBEE, Bar No. 15073

**WILSON GARBEE & ROSENBERGER**  
Attorney for Debtor(s)